

OCT 13 2009

**FRASER CLEMENS MARTIN & MILLER LLC**  
*Intellectual Property and Technology Law*

Donald R. Fraser  
William J. Clemens<sup>1</sup>  
Richard G. Martin  
J. Douglas Miller

28366 Kensington Lane  
Perrysburg, Ohio 43551-4163

e-mail: clemens@fraser-ip.com  
Telephone: (248) 960-2100  
Facsimile: (248) 684-1243

Stefan V. Chmielewski<sup>3</sup>  
Michael E. Dockins<sup>2</sup>  
Jacob M. Ward<sup>3</sup>  
William C. Dusseau  
Brenda J. Kruse  
Carrie A. Johnson<sup>4</sup>  
Michael J. Riesen

<sup>1</sup> Admitted in Ohio and Michigan  
<sup>2</sup> Admitted in Ohio and Indiana  
<sup>3</sup> Admitted in Michigan only  
<sup>4</sup> Admitted in Georgia only

**FAX TRANSMISSION**

Date: October 13, 2009  
To: Examiner L. Truvan GAU 2435 U.S. Patent and Trademark Office  
Fax: 571-273-8300  
From: William J. Clemens  
Re: 15632

We are transmitting a total of 8 pages (including cover sheet).  
If transmission is not complete, please call 419.874.1100.

COMMENTS: Please see the following Fee Transmittal form, Notice of Appeal, and Pre-Appeal Brief Request for Review for filing in the patent application S/N 09/855,000. Thank you.

**CONFIDENTIALITY NOTICE**

*The documents accompanying this transmission contain confidential information intended for a specific individual and purpose. The information is private, and is protected by law. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution or the taking of any action in reliance on the contents of this telecopied information is strictly prohibited. If you have received this communication in error, please notify us at 419/874-1100 (collect) so that we can arrange for the retrieval of the original document at no cost to you. Thank you.*

OCT 13 2009

PTO/SB/17 (10-08)

Approved for use through 06/30/2010. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/09/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**FEE TRANSMITTAL**  
**For FY 2009**☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 540.00

**Complete if Known**

Application Number	09/855,000
Filing Date	May 14, 2001
First Named Inventor	Schuster
Examiner Name	L. Truvan
Art Unit	2435
Attorney Docket No.	15632

**METHOD OF PAYMENT (check all that apply)**

- ☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_
- ☒ Deposit Account Deposit Account Number: 50-3156 Deposit Account Name: Fraser Clemens Martin &  
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
- ☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☐ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	52	26
Each independent claim over 3 (including Reissues)	220	110
Multiple dependent claims	390	195
<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>
- 20 or HP = _____	x _____	= _____
HP = highest number of total claims paid for, if greater than 20.		
<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>
- 3 or HP = _____	x _____	= _____
HP = highest number of independent claims paid for, if greater than 3.		
	<b>Multiple Dependent Claims</b>	<b>Fee (\$)</b>
	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 = _____	/ 50 = _____	(round up to a whole number) x _____	= _____	

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Notice of Appeal

Fees Paid (\$)

540

**SUBMITTED BY**

Signature	<i>William J. Clemens</i>	Registration No. (Attorney/Agent)	26,855	Telephone	248-860-2100
Name (Print/Type)	William J. Clemens			Date	October 13, 2009

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.